

APPLICATION DATA SHEET**Application Information**

Application Number::	NEW
Filing Date::	6/9/06
Application Type::	REGULAR
Subject Matter::	UTILITY
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R::	NONE
Number of Disks::	
Number of copies of CDs::	
Sequence Submission::	
Computer Readable Form (CRF)::	NO
Number of Copies of CRF::	
Title::	CORELESS LINEAR MOTOR
Attorney Docket Number::	359636-P0003
Request for Early Publication::	NO
Request for Non-Publication::	NO
Suggested Drawing Figure::	
Total Drawing Sheets::	32
Small Entity::	NO
Latin Name::	
Variety Denomination Name::	
Petition Included::	NO
Petition Type::	
Licensed US Govt. Agency::	
Contract of Grant Numbers::	
Secrecy Order in Parent Appln.::	NO

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**APPLICANT INFORMATION**

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: JP  
Status:: FULL CAPACITY  
Given Name:: TSUYOSHI  
Middle Name::  
Family Name:: MORIYAMA  
Name Suffix::  
City of Residence:: YAMATO-SHI  
State or Province of  
Residence:: KANAGAWA  
Country of Residence:: JAPAN  
Street of mailing address:: 18-29-303, YANAGIBASHI 2-CHOME  
City of mailing address:: YAMATO-SHI  
State or Province of mailing  
address:: KANAGAWA  
Country of mailing address:: JAPAN  
Postal or Zip Code of mailing  
address:: 242-0022

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: JP  
Status:: FULL CAPACITY  
Given Name:: IKUMA  
Middle Name::  
Family Name:: NARUYOSHI  
Name Suffix::  
City of Residence:: SAGAMIHARA-SHI  
State or Province of KANAGAWA

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Residence::

Country of Residence:: JAPAN

Street of mailing address:: 9-36, KAMIMIZO 4-CHOME

City of mailing address:: SAGAMIHARA-SHI

State or Province of mailing  
address:: KANAGAWA

Country of mailing address:: JAPAN

Postal or Zip Code of mailing  
address:: 229-1123

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: JP

Status:: FULL CAPACITY

Given Name:: TOMOYUKI

Middle Name::

Family Name:: HOSHIKAWA

Name Suffix::

City of Residence:: TAGATA-GUN

State or Province of  
Residence:: SHIZUOKA

Country of Residence:: JAPAN

Street of mailing address:: 561-5, MAMIYA, KANNAMI-CHO

City of mailing address:: TAGATA-GUN

State or Province of mailing  
address:: SHIZUOKA

Country of mailing address:: JAPAN

Postal or Zip Code of mailing  
address:: 419-0123

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**CORRESPONDENCE INFORMATION**

CORRESPONDENCE NUMBER:: 47604

PHONE NUMBER:: 703-773-4149

FAX NUMBER:: 703-773-5064

E-MAIL ADDRESS:: DALE.LAZAR@DLAPIPER.COM

**REPRESENTATIVE INFORMATION**

Representative Customer 47604

Number::

**DOMESTIC PRIORITY INFORMATION**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/JP2004/018393	12/9/04

**FOREIGN PRIORITY INFORMATION**

Country::	Application Number::	Filing Date::	Priority Claimed
JAPAN	2003-410867	12/9/03	YES
JAPAN	2003-410870	12/9/03	YES

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**ASSIGNEE INFORMATION**

Assignee Name::	TOSHIBA KIKAI KABUSHIKI KAISHA
Street mailing address::	2-11, GINZA 4-CHOME, CHUO-KU
City mailing address::	TOKYO
State or Province of mailing address::	
Country of mailing address::	JAPAN
Postal or Zip Code of mailing address::	104-8141

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